Poster Sessions

1.16 to 3.70). Persistent offenders, defined by report of both juvenile and adult arrest, had elevated odds of STI compared to those who were never arrested (adjusted OR: 1.72, 95% CI 1.06 to 2.80), while those who reported history of arrest either as a juvenile or as an adult but not during both time periods did not have elevated STI risk.

Conclusions Adolescents who have very high repeat contact with the criminal justice system, who are convicted as juveniles, or who remain offenders into adulthood are priority populations for STI treatment and prevention. Though the potential for residual confounding especially due to unmeasured mood and personality characteristics is a limitation, the independent associations between juvenile CJI indicators and adult STI suggest that for some, the disruptive effect of juvenile CJI may contribute to a trajectory that results in adulthood STI see Abstract P2-S1.15 Table 1.

P2-S1.16 social influences on relationship fidelity and CONCURRENCY PATTERNS AMONG LATINO ADOLESCENTS IN SAN FRANCISCO

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Background Our previous research in San Francisco's Mission District, a predominantly Latino neighbourhood characterised by high immigration, poverty, and gang-related violence, highlighted diverse partnership patterns among youth and the role of gang affiliation in high-risk sexual activity and pregnancy. 38% of Latino youth reported concurrent partnerships.

Methods We conducted 33 semi-structured in-depth interviews with immigrant and US-born male and female Latino youth aged 16-21 to explore how the social environment affected partnership formation and STI risk. Participants were recruited from community venues; interviews were conducted in Spanish or English. Interview transcripts were coded in Atlast.ti. We analysed the following themes: relationship fidelity; STI prevention; and concurrency norms (agreement with the statement, Many Mission youth in a relationship are also seeing someone on the side).

Results Participants were 48% female; had a mean age of 17.5 years; and 55% were immigrants from Mexico or Central America. 27 of 30 believed that concurrency is widespread, described as "cheating" (having a "main girl with 'friends with benefits' on the side") or resulting from initiating new relationships before ending existing ones or between serial break-ups with a main partner. Infidelity was motivated by machismo, a cultural notion of masculinity that was heightened for men respected for having multiple partners; boredom with a single partner; an ideal that fidelity was only relevant within marriage with cheating expected prior to that; and revenge for known, suspected or pre-emptive cheating. Street gangs introduced distinct reasons for young males preferring multiple, casual partnerships: limited time for relationships because of obligations to the gang first and foremost; disinterest in committed relations to avoid emotional vulnerability given emotional demands of street life; and multiple partners bringing status: "you got more game; you got more reputation." Young women recognised that having partners in a gang brought social prestige and articulated strategies for increasing intimacy (eg, pregnancy) to draw partners away from the street and strengthen commitment to the relationship. Despite a perception of pervasive concurrency, STI risk perception was low.

Conclusions Many relationship norms and expectations held by youth supported concurrency, highlighting the importance of addressing social influences like gangs in STI prevention.

P2-S1.17 EVALUATING NATIVE STAND: A PEER EDUCATION CURRICULUM FOR HEALTHY DECISION-MAKING FOR NATIVE YOUTH

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Background American Indian/Alaska Native (AI/AN) youth are disproportionately affected by a myriad of health and social conditions. Compared to other US teens, AI/AN youth have higher rates of sexually transmitted infections, teen pregnancies, tobacco use, alcohol use, and substance use. Native STAND (Native Students Together Against Negative Decisions), a 29-session peer educator curriculum was developed to address a range of sexual and reproductive health topics, including important communication and peer education skills. It is the first peer educator curriculum for healthy decision making developed for AI/AN youth.

Methods Eighty students attending four Bureau of Indian Education (BIE) boarding schools were selected to be trained as peer educators. The curriculum was delivered by trained adult staff at each school and the sessions occurred over the course of the school year with each session approximately 90 min in length. A pre- and post-test using Computer Assisted Self-Interviewing (CASI) was administered to the participants. At the end of the program, focus groups with peer educators and school staff and key informant interviews with facilitators and school administration were conducted to identify programmatic strengths and weaknesses and inform final program revisions.

Results Overall, analysis of pre- and post-test CASI data showed students at all four schools experienced increases in talking to peers about sexual health; in STI/HIV prevention and reproductive health knowledge; in the intention to use condoms to avoid pregnancy and STIs; and in condom self-efficacy indices. Focus groups and key informant interviews revealed that facilitators and students felt they learnt a lot through the curriculum and enjoyed the program; they saw the program as a badly needed source of clear and honest information; and they voiced their desire to have the program continue.

Conclusions Native STAND was well-received at all four sites by students, facilitators, and school administrators. Almost everyone felt that no topics should be eliminated and that all the curriculum's activities were relevant and important to include to address the unique needs of Native youth. We will incorporate findings from the evaluation into the curriculum and make it widely available.

ACCURACY OF SELF-REPORTED CONDOM USE ASSESSED BY THE SEMEN Y-CHROMOSOME BIOMARKER FOR UNPROTECTED SEX

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Background Adolescents may use condoms inconsistently or incorrectly, and may over-report their condom use. Biomarkers offer a